2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000168539

1. Entity Name

DOUBLE A CONSTRUCTION AND DEVELOPMENT, INC.



FILED
May 01, 2006 08:00 Al
Secretary of State

Principal Place of Business

pai riace of ousmess

1975 SANSBURY WAY, SUITE 113 WEST PALM BEACH, FL 33411 Mailing Address

1975 SANSBURY WAY, SUITE 113 WEST PALM BEACH, FL 33411



DO NOT WRITE IN TH	11,	S	S	PΑ	CI	Ε
--------------------	-----	---	---	----	----	---

6. Name and Address of Current Registered Agent

 01092006
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-1250202
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

MARELL, WILLIAM J ESQ. 1601 FORUM PLACE, SUITE 1101 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

			IN THIS STAGE			
				· · · · · · · · · · · · · · · · · · ·		
	named entity submits this statement for the parties of registered agent.	purpose of changing its registers	ed office or	registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	d Agent signatur	e required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000545594 05/11/06-80083-010 150.00	
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PANTALEO, FRANK 1975 SANSBURY WAY, SUITE 113 WEST PALM BEACH, FL 33411					
TITLE	WEST PALM BEACH, FL 33411			· • =		
NAME						
STREET ADDRESS						
CITY-ST-ZIP					,	
TITLE				•		
NAME						
STREET ADORESS CITY-ST-ZIP			DO NOT WRITE			
TITLE				war in the second of the	±	
NAME				IN	THIS SPACE	
STREET ADDRESS						
CITY-ST-ZIP						
rmle						
NAME						
STREET ADDRESS City-St-Zip						
					<u> </u>	
ijtle Vame						
STREET ADDRESS						
CITY-ST-ZIP						
f2. I hereby of indicated of the corp changed,	certify that the information supplied with this fill on this report or supplemental report is true poration or the receiver or trustee empowed or on an attacher and an a bress, whall	ling does not qualify for the exe no accurate and that my signatu it execute this report as require ther like empowered.	mptions course shall haved by Chap	ntained in Chapter 119 ve the same legal effecter 607, Florida Statute	o, Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if	